

Application Data Sheet

**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	MOTOR VEHICLE WITH EXHAUST PURIFICATION
Attorney Docket Number::	1501-1315
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	4
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: SIXTEN  
Middle Name::  
Family Name:: BERGLUND  
Name Suffix::  
City of Residence:: TORSLANDA  
State or Province of  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing BJORKSTIGEN 7  
Address::  
City of Mailing Address:: TORSLANDA  
State or Province of Mailing Address::  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: S-423 53

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: ANDERS  
Middle Name::  
Family Name:: ERIKSSON  
Name Suffix::  
City of Residence:: GOTEBOG  
State or Province of  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing LOVSKOGSGATAN 14  
Address::  
City of Mailing Address:: GOTEBOG

State or Province of Mailing Address::  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: S-413 20

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: MARCUS  
Middle Name::  
Family Name:: STEEN  
Name Suffix::  
City of Residence:: ANGERED  
State or Province of  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing FOTBOLLSVAGEN 31  
Address::  
City of Mailing Address:: ANGERED  
State or Province of Mailing Address::  
Country of Mailing Address:: SWEDEN  
Postal or Zip Code of Mailing Address:: S-424 33

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: SWEDEN  
Status:: Full Capacity  
Given Name:: SOREN  
Middle Name::  
Family Name:: UDD  
Name Suffix::  
City of Residence:: NODINGE  
State or Province of  
Residence::  
Country of Residence:: SWEDEN  
Street of Mailing PILUDDSVAGEN 3

Address::

City of Mailing Address:: NODINGE

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing Address:: S-440 45

**Correspondence Information**

Correspondence Customer 00466

Number::

**Representative Information**

Representative Customer	00466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/SE04/00514	4/2/04

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	0300954-5	4/2/03	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::